

STATEWIDE JOB ANNOUNCEMENT
ACTIVE DUTY FOR OPERATION SUPPORT (ADOS)
ARMY NATIONAL GUARD

OPEN TO: M-Day, Non-Technician

OPEN DATE: 20 May 2019

CLOSING DATE: Until filled

POSITION TITLE: TXARNG Casualty Assistance NCO, G1

WORK LOCATION: Camp Mabry, Austin, Texas

STARTING DATE: 1 June 2019

RANK: E6 –E7

BRANCH: Open to Texas Army National Guard. You must be a TX Army National Guard member at the time of application.

HOW TO APPLY: Interested Applicants will assemble required ADOS packet with checklist and email documents to:
ng.tx.txarng.list.boards-section@mail.mil

Email Subject: ADOS - TXARNG Casualty Assistance NCO, G1 - Rank, Last, First (ex: ADOS - TXARNG Casualty Assistance NCO, G1 – MSG Snuffy, Joe)

ADOS Checklist can also be located on the eLSP website @ <https://portal.tx.ng.mil/arg/arg001/SitePages/Budget.aspx> - Select the “FY 19 ADOS Folder” and download or print the required checklist.

All ADOS Criteria must be provided. Only complete ADOS packets will be considered.

POC for submission is Senior HR Advisor, G1, TXARNG Chief Warrant Officer Five Cannaday, Anita L. at 512-782-5510.

CONSIDERATION: All applicants will receive consideration for this position without regard to race, religion, color, national origin, sex, age, political affiliation or other non-merit factors.

DUTIES AND RESPONSIBILITIES:

IAW AR 638-8, Army Casualty Program, the individual is responsible for providing assistance as the point of contact/facilitator between the TXARNG and the Casualty Assistance Centers (CAC)s located at local installations, as required when a casualty occurs with a Soldier assigned in an authorized duty status. Provide assistance as required when casualty is not in an authorized duty status. Ensure Casualty Assistance Officers are trained and certified to provide assistance to the families of fallen Army National Guard Soldiers. Must be able to be available at all times to provide administrative assistance to TXARNG Leadership and communicate with CAC’s at installations. Fulltime position, during core duty hours, work with the G1, TXARNG, and have a SECRET clearance. Must be able to transfer to Joint Forces Headquarters, duty position is MOS immaterial. Must be able to brief and represent G1 leadership as applicable and required.



FY 19 G1 FTNGD-OS/ADOS CHECKLIST

SOLDIER WILL NOT REPORT FOR DUTY UNTIL HIS/HER ORDERS ARE PUBLISHED

Rank/Name: _____ LAST 4: _____ Position: _____

Duty location (City): _____ Req Start date: _____

PART I – PACKET CONTENTS CHECKLIST / PM REVIEW

REQUIRED DOCUMENTS: (MUST BE SUBMITTED IN THE ORDER BELOW)

***Each box must be initialed. If not applicable write "N/A".**

- RECOMMENDATION MEMO (list NO negative or flagging actions pending; signed by M-day CDR)
- JUSTIFICATION MEMO STATING PURPOSE, PLACE & DURATION (Signed by FTUS OIC where performing ADOS)
- TXARNG 73R REQUEST FOR ORDERS (inclusive dates are subject to change depending on funding availability)
- ARNG 1058-R
- ARNG 1058-R1
- MEDPROS IMR PRINTOUT (Must be **GREEN** on ALL items; PHA within 1yr and HIV within 2yrs)
- DA 705 APFT SCORE CARD (Must state "FOR RECORD GO" and signed; dated within 6 months of start date)
- DA 5500/5501 BODY FAT SHEET or HT/WT MEMO (must be dated within 6 months of start date) Soldier must meet standard or body fat standard
- NG 23 (RPAM)
- RPAM Statement of Understanding (Must be within 30 days of proposed start date)
- CERTIFICATE OF ACTIVE DUTY TIME MEMO (Must be within 30 days of proposed start date)
- PREGNANCY TEST (Females Only) within 30 days of the proposed start date
- DA 5960, Update required yearly (With Supporting Docs if Updating/Changes are required for ex: single to married)
Must be signed by M-Day Commander
- COPY of SECURITY CLEARANCE MEMO
- COPY OF LEAVE BALANCE STATEMENT (If leave balance is greater than 10 days "get well" plan must be submitted with leave balance)

*****SOLDIER IS RESPONSIBLE FOR SUBMITTING ADOS ORDERS TO UNIT TO ENSURE DEERS INFORMATION IS UPDATED THRU SIDPERS AND THE BELOW WEBSITE FOR TRICARE ENROLLMENT FORMS*******

<http://www.tricare.mil/mybenefit/Forms.do#Enroll>

*****FAILURE TO ENSURE SIDPERS ACTIONS ARE COMPLETE MAY IMPACT DEERS AND ELIGIBILITY AS IT PERTAINS TO MEDICAL TREATMENT*******

PART II -- INSTRUCTIONS AND BDE ADOS MANAGER SCREENING

- Does not have 17 years or more of Active Service (Must not serve more than 17 years as a result of the duty).
- Is not currently serving on other FTNGD-OS/ADOS orders that may cause the member to exceed 2190 days (6yrs) as a result of this duty that would qualify for separation pay. *Separation Pay Exceeding 2190 days will grant the member separation pay upon release from FTNGD-OS. Funding for separation pay will come from the operational budget of the Program Manager that generated the order which exceeded the rule.*
- Is not within 12 months of MRD/ETS on the report day of the tour.
- Must meet the medical Retention standards IAW Chapter 3, AR 40-501.
- Is within commuting distance of the assigned duty station.
- Has been counseled on the non-availability of TDY Travel/Per Diem; travel from HOR to duty station is by privately owned conveyance at no cost to the government.
- Human immune-deficiency virus (HIV) showing “green” in MODS (MEDPROS IMR) within 24 months of proposed start date.
- Soldier understands that they will come off ADOS orders for AT and Schools

G1 QC: _____
(Print Name) (Signature and Date)

PART III – APPLICANT ACCEPTANCE OF CONDITIONS

“I, _____, understand that the position to which I am applying is temporary in nature and that it is against policy for anyone to offer or promise full-time employment as a result of this temporary tour. Furthermore, I understand that funding is not available for PCS or TDY travel, (mandatory travel directed by authorized personnel will be funded with approval from Program Manager) that I must reside within commuting distance of my assigned duty station, that I must exhaust or sell any accrued leave if there is at least a one-day break during the tour, and that temporary employment can be terminated or may not be renewed due to funding.

Applicant Signature: _____ Date: _____